UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:	Case No. 09-33135
SIDNEY LOFTON	
RUBY LOFTON	
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S AMENDED FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 09/04/2009.
- 2) The plan was confirmed on $\underline{12/07/2009}$.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on 12/07/2009.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was completed on 03/11/2014.
 - 6) Number of months from filing to last payment: 54.
 - 7) Number of months case was pending: 92.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: \$35,392.00.
 - 10) Amount of unsecured claims discharged without payment: \$28,046.37.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$20,625.00 Less amount refunded to debtor \$385.76

NET RECEIPTS: \$20,239.24

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$3,500.00
Court Costs \$0.00
Trustee Expenses & Compensation \$1,067.43
Other \$36.50

TOTAL EXPENSES OF ADMINISTRATION:

\$4,603.93

Attorney fees paid and disclosed by debtor: \$0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE CHRIST MEDICAL CENT	Unsecured	368.64	NA	NA	0.00	0.00
ADVOCATE HOME CARE PRODUCTS	Unsecured	92.44	NA	NA	0.00	0.00
AMERICAN GENERAL FINANCE	Secured	4,225.00	5,075.59	5,075.59	5,075.59	749.85
AMERICAN GENERAL FINANCE	Unsecured	2,080.00	5,075.59	NA	0.00	0.00
ANDINA & IRABAGON	Unsecured	16.95	NA	NA	0.00	0.00
CARDIO & VASCULAR SURGICAL	Unsecured	1,216.72	NA	NA	0.00	0.00
CHRIST MEDICAL GROUP	Unsecured	143.27	NA	NA	0.00	0.00
CITY OF CHICAGO WATER DEPT	Secured	85.00	113.35	85.00	85.00	0.00
COMCAST	Unsecured	69.00	NA	NA	0.00	0.00
ECAST SETTLEMENT CORP	Unsecured	391.00	391.09	391.09	39.11	0.00
GEORGE J DANGLES MD	Unsecured	35.00	NA	NA	0.00	0.00
GMAC	Unsecured	NA	0.00	115.65	11.57	0.00
GMAC	Secured	NA	0.00	500.00	500.00	0.00
GMAC	Secured	7,483.00	7,598.65	7,483.00	7,483.00	1,100.39
ILLINOIS HEART & VASCULAR	Unsecured	15.13	NA	NA	0.00	0.00
MACNEAL HEALTH NETWORK	Unsecured	397.94	NA	NA	0.00	0.00
MALCOM S GERALD & ASSOC	Unsecured	164.76	NA	NA	0.00	0.00
MARQUETTE NATIONAL BANK	Secured	125,989.00	NA	NA	0.00	0.00
MARQUETTE NATIONAL BANK	Secured	0.00	0.00	0.00	0.00	0.00
MIDAMERICA CARDIOVASCULAR	Unsecured	637.00	NA	NA	0.00	0.00
MIDLAND CREDIT MANAGEMENT IN	Unsecured	3,013.00	3,020.50	3,020.50	302.05	0.00
MIDWEST ANESTHESIA	Unsecured	164.00	NA	NA	0.00	0.00
MIDWEST ANESTHESIA	Unsecured	101.00	NA	NA	0.00	0.00
MIDWEST ANESTHESIA	Unsecured	441.00	NA	NA	0.00	0.00
NEUROLOGY ASSOCIATES	Unsecured	129.49	NA	NA	0.00	0.00
OVERLAND BOND & INVESTMENT	Secured	10,175.00	NA	NA	0.00	0.00
OVERLAND BOND & INVESTMENT	Unsecured	8,592.00	NA	NA	0.00	0.00
PALISADES	Unsecured	NA	543.34	543.34	54.33	0.00
PRA RECEIVABLES MGMT	Unsecured	NA	2,008.18	2,008.18	200.82	0.00
PRA RECEIVABLES MGMT	Secured	8,475.00	15,978.16	NA	0.00	0.00
PRA RECEIVABLES MGMT	Unsecured	6,860.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
PREMIUM ASSET RECOVERY CORP	Unsecured	NA	136.01	136.01	13.60	0.00
SPRINT	Unsecured	670.00	NA	NA	0.00	0.00
STEPHEN SOKALSKI D O LTD	Unsecured	61.00	NA	NA	0.00	0.00
T-MOBILE/T-MOBILE USA INC	Unsecured	NA	200.00	200.00	20.00	0.00
TRUSTMARK RECOVERY SVC	Unsecured	17.74	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:	<u> </u>		
-	Claim	Principal	Interest
	Allowed	<u>Paid</u>	<u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$12,558.59	\$12,558.59	\$1,850.24
All Other Secured	\$585.00	\$585.00	\$0.00
TOTAL SECURED:	\$13,143.59	\$13,143.59	\$1,850.24
 Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$6,414.77	\$641.48	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$4,603.93 \$15,635.31	
TOTAL DISBURSEMENTS :		<u>\$20,239.24</u>

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 04/20/2017 By:/s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.